

**Enterprise Databases Group
Division of Information Distribution**

Public Use Files Catalog

Medicare/Medicaid Data Files

**October 1, 1999
(REVISED-2/2000)**

**U.S. Department of Health and Human Services
Health Care Financing Administration
Office of Information Services**

FOREWORD

The Health Care Financing Administration (HCFA) is charged with the primary responsibility of managing the Medicare and Medicaid health care delivery programs. HCFA's Public Use Files (PUFs) Catalog is published annually by the Office of Information Services (OIS), Enterprise Databases Group (EDG), Division of Information Distribution (DID). The PUFs Catalog is a listing of current and historic Medicare and Medicaid data files that are available to the public. These files contain information on Medicare enrollment, payments, utilization, and providers, and Medicaid eligibles, recipients, medical vendor payments and services. In addition, the Catalog contains instructions for ordering Medicare and Medicaid data files from HCFA. This publication also contains helpful order forms designed to assist requestors. Data files are grouped under the heading of Public Use Files and Beneficiary Encrypted Data Files. Over the years, the increasing public demand for a compilation of HCFA data files has been an overwhelming contributing factor to the publication of this valuable document. The catalog serves a useful purpose in aiding thousands of researchers and health care professionals in managing public health care delivery systems in the United States each year.

WHAT'S NEW:

As of January 31, 2000 we are no longer releasing data onto 6250 round reel-to-reel tapes.

Race/Ethnicity Data in HCFA Public Use Files

HCFA's policy is to collect the most comprehensive race/ethnicity data available. Public Use Files containing race/ethnicity data have been expanded to include more detailed classifications.

Ordering Process

Please ensure that what you order is the exact data file you need and in the correct format. Each data file is individually generated to the specifications stipulated in this catalog. To process each order, HCFA incurs processing costs associated with staff time, computer time, magnetic media and shipping. If you order the incorrect data file or the incorrect format, your money is **non-refundable**. Please allow 4 to 6 weeks for processing.

Acknowledgments

The Enterprise Databases Group has the responsibility for planning and development of the PUFs Catalog under Betty Jackson, Director and Joseph F. Daniloski, Deputy Director. Anthony Parker, Acting Director, Division of Information Distribution contributed to the timely completion of the revised version of the Catalog. Key contributors to the content and format of the Catalog included Laquetta McNeal, Valeria Watkins, Helen Dea, and Andrew Stewart in the Division of Information Distribution.

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PUBLIC USE FILES CATALOG

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PUBLIC USE FILES CATALOG

NOTICE TO PUBLIC USE FILE CLIENTS:

PRICES

A few of our Public Use Files (PUFs) prices have increased and a few have decreased. During an extensive review it was determined that changes were necessary. We will continue to review our pricing methodology and make additional adjustments when warranted. The change to version H has greatly increased the length of our utilization records and the time it takes to process the files. Look for new pricing information to appear in the Public Use Files Catalog on our website at <<http://www.hcfa.gov/stats/stats.htm>>.

INTERNET PRESENCE

The Health Care Financing Administration (HCFA) has posted most of the personal computer based data files on the Internet at <<http://www.hcfa.gov/stats/pufiles.htm>>. Only the most current Public Use Files (PUFs) are posted at this web site. Earlier data files are available for purchase by contacting the PUFs staff at (410) 786-3691 or PUFs@hcfa.gov.

RESEARCH DATA ASSISTANCE CENTER (ResDAC)

ResDAC is a consortium of faculty and research staff from the University of Minnesota, Boston University, and Dartmouth College. ResDAC is funded directly by HCFA. The goal of the ResDAC is to assist HCFA in increasing the number of new researchers skilled in accessing and using HCFA data for studies which will improve the Medicare and Medicaid programs and add value to current HCFA activities. ResDAC serves as a focal point for researchers in pursuing studies and provides the expertise of faculty and others who are knowledgeable and experienced in both HCFA's data and program history. ResDAC can be reached at the University of Minnesota, School of Public Health, telephone - 888-9-ResDAC or (888-973-7322), fax - 612-378-4866, or resdac@tc.umn.edu or visit the website at <<http://www.hcfa.gov/ord/resdac0.htm>>.

SECTION I

SUBJECT INDEX OF FILES AND

MEDIA MATRIX

SUBJECT INDEX AND MEDIA MATRIX

	Internet	Diskette	IBM/Tape Cartridge	BEFs*	Page
MEDICARE					
Cost Limits					
HHA					
Cycle 14 Data Set--limits Effective 10/1/97	X	X			20
Cycle 15 Data Set--limits Effective 10/1/98	X	X			20
Cycle 1 Data Set Aggregate Beneficiary Limits-- limits Effective 10/1/97	X	X			20
Cycle 2 Data Set Aggregate Beneficiary Limits-- limits Effective 10/1/98	X	X			20
Cycle 13 to Calculate Budget Neutrality and And Cost Impacts--7/1/97	X	X			21
Cost Reports					
End Stage Renal Disease					
Renal Dialysis Facilities	X	X			21
Home Health Agency					
HHA Cost Report System Master			X		21
HHA Practical Data Set			X		22
Hospital					
Hospital Cost Report Systems Master File			X		22
PPS IX-XII Capital Data Sets			X		23
PPS IX-XII Exempt Units	X	X			23
PPS IV-XII Minimum Data Sets			X		23
PPS IX-XII Medicare Part B Data Sets			X		24
Worksheet A Data Set			X		24
PPS Hospital Data Set			X		25
Skilled Nursing Facility					
SNF Minimum Data Sets			X		25
Skilled Nursing Facility Cost Report System Master File			X		26

SUBJECT INDEX AND MEDIA MATRIX

	Internet	Diskette	IBM/Tape Cartridge	BEFs*	Page
Enrollment					
Annual County Enrollment File (S) - DUA			X		26
Annual Zipcode Enrollment File (S) - DUA			X		26
Denominator File			X	X	56
Health Skeleton Eligibility Write-off (HISKEW) File			X	X	56
Payment Rates--Institutional Providers					
After Outlier Removed/Before Outlier Removed Tables	X	X			27
DRG Relative Weights	X	X			27
HCFA Medicare Case-Mix Index File	X	X			28
HCFA Wage Data	X	X			29
HCFA Hospital Wage Indices	X	X			29
Prospective Payment System (PPS) Payment Impact File	X	X			29
PPS Standardizing File	X	X			30
Provider Specific File	X	X			30
Reclassified Hospitals	X	X			30
Skilled Nursing Facility Prospective Payment Rates	X	X			31
Home Health Prospective Payment System	X	X			31
Payment Rates Non-Institutional Providers					
Ambulatory Surgical Center (ASC) Procedures and Payment Groups**	X	X			31
Annual Physician Fee Schedule Payment Amount - National**	X		X		32
Annual Physician Fee Schedule Payment Amount - Carrier**	X		X		32
Clinical Diagnostic Lab Fee Schedule - National/Carrier File** beginning in CY1995	X	X			32
Durable Medical Equipment, Prosthetics/Orthotics, and Supplies (DMEPOS) Fee Schedule	X	X			33
National Physician Fee Schedule Relative Value File**	X	X			33

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	Internet	Diskette	IBM/Tape Cartridge	BEFs*	Page
Providers					
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Medicare Part B Durable Medical Equipment Suppliers	X				34
Provider of Services File...(June 1991 to Present)			X		35
Provider of Services - Hospital Listing	X	X			35
Utilities/Miscellaneous					
Berenson-Eggers Type of Service (Betos) Files **	X	X			36
Carrier/Locality State & County File	X	X			36
ICD-9-CM Conversion Software Files		X			36
ICD-9-CM Version 17.0 File	X	X			37
PPS SSA/FIPS MSA State and County Crosswalk File	X	X			37
Utilization					
End Stage Renal Disease (ESRD) Facility Survey File	X	X			38
Hospital Service Area File (S)			X		38
Physician/Supplier Procedure Summary Master File**			X		38
Standard Analytical Files (SAF) Home Health Agency Hospice Inpatient Physician/Supplier Part B** Outpatient Skilled Nursing Facility			X	X	53
Expanded Modified Medpar - Hospital (National) File			X	X	54
Expanded Modified Medpar - Hospital (State) File			X	X	55
Expanded Modified Medpar - Skilled Nursing Facility File			X	X	55
Physician Sample File (Formerly BMAD Provider File)			X	X	55
5% Sample Durable Medical Equipment (DME)			X	X	56

SUBJECT INDEX AND MEDIA MATRIX

	Internet	Diskette	IBM/Tape Cartridge	BEFs*	Page
MEDICAID					
Medicaid Statistical File -- Form HCFA-2082 (S)			X		39
Medicaid Drug Utilization by State by Quarter File			X		40
Medicaid Statistical File Diskette -- Form HCFA-2082 (S)	X	X			41
*BEFs = A Signed Agreement for Release of Beneficiary Encrypted Files Required					
** Copyright					
(S) Denotes Aggregated or Summary Data					

SECTION II

GENERAL INSTRUCTIONS

FOR ORDERING

PUBLIC USE FILES

Public Use Files (PUFs)
GENERAL INSTRUCTIONS AND ORDERING INFORMATION
October 1, 1999

Please ensure that what you order is the exact data file you need and in the correct format. Each data file is individually generated to the specifications stipulated in this catalog. To process each order, the Health Care Financing Administration (HCFA) incurs processing costs associated with staff time, computer time, magnetic media and shipping. If you order the incorrect data file or the incorrect format, your money is non-refundable. Please allow 4 to 6 weeks for processing.

1. Standard Output Specifications:

- a. Tape
 - 1. Recording Mode ----- EBCDIC
 - 2. Tape Labeling ----- IBM Standard
 - 3. Density ----- IBM 3480 Cartridge
- b. Diskette 3 1/2"
 - 1. ASCII
 - 2. High Density
- c. Standard Analytical Files (See Section IV)
 - 1. Variable length
 - 2. Fixed length - multiple linked files - can be used by non-mainframe (PC-compatible for downloading)

2. Methods of Payment (All monies must be drawn on a U.S. bank):

- a. Payments must accompany order forms (No credit card payments). Make **company check** or **money order** payable to:

Health Care Financing Administration-PUF or HCFA-PUF

- b. Electronic Transmitted Payment For Other Federal Agencies Only
 - 1. U.S. Federal Government Agencies need Agency Location Code
 - 2. U.S. Banks only (contact HCFA's Accounting Office - 410-786-5428).
- c. Purchase Orders require prepayment.

3. Public Use Files Inquiries:

- a. The Public Use Files Hotline:
(410) 786-3691
- b. The Public Use Files Fax number:
(410) 786-6418
- c. E-mail Address:
PUFS@HCFA.GOV
- d. The Beneficiary Encrypted Files Hotline:
(410) 786-3690

PRICES EFFECTIVE UNTIL OCTOBER 1, 2000
 U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



Public Use Files (PUFs)
GENERAL INSTRUCTIONS AND ORDERING INFORMATION
October 1, 1999

- e. Decision Support Access Facility (DSAF) Helpline:
(410) 786-0159
- f. General Statistical Inquiries:
Medicaid: (410) 786-0165 or Medicaidstats@HCFA.GOV
Medicare: (410) 786-3689 or Medicarestats@HCFA.GOV

4. MAILING INSTRUCTIONS:

a. Regular Mailing Address*: (Regular U.S. Postal Service)

Health Care Financing Administration
 Public Use Files
 Accounting Division
 P. O. Box 7520
 Baltimore, Maryland 21207-0520

b. Federal Express, Airborne, etc.

Health Care Financing Administration
 OFM/Division of Accounting-Kara Cosby
 7500 Security Boulevard, C3-09-27
 Baltimore, Maryland 21244-1850

*Address must be written in its entirety.

Request must include name and telephone # of contact person.

(Allow 4-6 weeks for delivery depending on volume of PUF orders received)

5. Magnetic Media Return Policy:

HCFA will honor written requests for replacement files within **60 days** of the shipment date provided the cartridges or diskettes are returned with an explanation of the problem to the following address:

HCFA/Data Release Area
 Tape Library-PUF
 7500 Security Boulevard, NL-37
 Baltimore, Maryland 21244-1850

6. Data Quality Issues Form:

If while processing the file(s), an anomaly or data error is disclosed, please mail the Data Quality Issues form on page 15 with a detailed explanation of the problem to the address on the form.

7. Reproducing Public Use Files Documentation:

If you wish to reprint this package in whole or in part as an insertion to an article for distribution, you must notify:

Health Care Financing Administration
 Office of Information Services
 Enterprise Databases Group
 Public Use Files - Publication Release
 7500 Security Boulevard, N3-17-07
 Baltimore, Maryland 21244-1850

PRICES EFFECTIVE UNTIL OCTOBER 1, 2000
 U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



Please Print Legibly or Type

(This form is not to be used as a Beneficiary Encrypted Agreement Form)

PUBLIC USE FILES ORDER FORM

Health Care Financing Administration
Public Use Files
Accounting Division
P.O. Box 7520
Baltimore, Maryland 21207-0520
(410) 786-3691

Date: _____

PURCHASE REQUEST

<u>FILE NAMES</u>	<u>YEAR</u>	<u>COST</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
TOTAL		_____

COMPANY CHECK/MONEY ORDER AMOUNT: Payable to: HCFA-PUF _____

(No Personal Checks. All checks must be drawn on a U.S. bank.)

(No Credit Cards Accepted)

AGENCY LOCATION CODE (U.S. Federal Government) _____

OUTPUT SPECIFICATIONS: (See File Descriptions and Prices)

1. Cartridge (3480) _____ 2. Diskette _____

PPS Cost Reports Only, Circle a or b a. SAS b. Sequential

EXPRESS COMPANY: (i.e., Fed Exp, Airborne, etc.) _____

EXPRESS ACCOUNT: (Number) _____

NAME: _____

TITLE: _____

COMPANY/ORGANIZATION: _____

ADDRESS: _____

CITY/STATE/ZIPCODE: _____

PHONENUMBER: _____

FAX NUMBER: _____

SIGNATURE: _____

Allow 4-6 weeks for delivery.

This form can be reproduced for additional orders.

PUF-3 Rev (10/99) U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



DATA QUALITY ISSUES

Complete the following form and either:

Mail to: Division of Data Quality
HCFA/OIS/SSG/DDQ
N2-18-13
7500 Security Boulevard
Baltimore, MD 21244

Fax to: 410-786-0626
E-mail: DQI@HCFA.GOV
Telephone: 410-786-2860

Date: _____

Contact Name

Phone

Organizational Component

Circle: Medicare Medicaid

Describe issue (include how issue was discovered, run date, creation date, etc.):

System and/or files affected (including years): _____

Data elements or fields affected: _____

Any action taken to resolve issue? If so, please describe: _____

Attachments?: Yes ☐ No ☐ - If yes, please describe:

Additional Remarks: _____

SECTION III

DESCRIPTIONS AND PRICES

(PUBLIC USE FILES ONLY)

BENEFICIARY ENCRYPTED FILES EXCLUDED

**PUBLIC USE FILES
FILE DESCRIPTIONS AND PRICES**

October 1, 1999

COST LIMITS

MEDICARE HHA CYCLE 14 DATA SET

This file contains cost, statistical and other data used in establishing the Home Health Agency (HHA) Cost Limits for fiscal periods beginning on or after October 1, 1997. The cost and statistical data were obtained from Free Standing Medicare HHA cost reports (Forms 1728-86 and 1728-94) for full cost reporting periods "Beginning" on "or after May 31, 1991" - and - which had "Settlement" dates of October 10, 1995, or earlier. This file also contains the applicable 1992 hospital wage index and HHA Market Basket Adjustment Factor.

Media: Diskette and Internet
File Cost: \$285.00

Note: Historical Files Available Cycle 10 (7/1/92) through Cycle 13 (7/1/97)

MEDICARE HHA CYCLE 15 DATA SET

This file contains cost, statistical and other data used in establishing the Home Health Agency (HHA) Cost Limits for fiscal periods beginning after October 1, 1998. The cost and statistical data were obtained from Free Standing Medicare HHA cost reports (Forms 1728-94) for full cost reporting periods "Beginning" on "or after January 1, 1994," and settled by May 1998. This file also contains the applicable 1992 hospital wage index and HHA Market Basket Adjustment Factor.

Media: Diskette and Internet
File Cost: \$285.00

MEDICARE HHA ABL CYCLE 1 DATA SET

This file contains data used to calculate the Home Health Agency (HHA) Aggregate Beneficiary Limits (ABL) for cost reports beginning on or after October 1, 1997, as required by the Balanced Budget Act of 1997. The calculation of the limitations required that we use unduplicated census counts for each provider which were calculated from the National Claims History File and are included in the file. The file was created using the most recent settled cost report data for both free-standing and hospital based providers. The file also contains applicable hospital wage index and HHA Market Basket Adjustment Factor.

Media: Diskette and Internet
File Cost: \$285.00

MEDICARE HHA ABL CYCLE 2 DATA SET

This file contains data used to calculate the Home Health Agency (HHA) Aggregate Beneficiary Limits (ABL) for cost reports beginning on or after October 1, 1998, as required by the Balanced Budget Act of 1997. The calculation of the limitations required that we use unduplicated census counts for each provider which were calculated from the National Claims History File and are included in the file. The file was created using the most recent settled cost report data for both free-standing and hospital based providers. The file also contains applicable hospital wage index and HHA Market Basket Adjustment Factor.

Media: Diskette and Internet
File Cost: \$285.00

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MEDICARE HOME HEALTH AGENCY CYCLE 13 DATA SET USED TO CALCULATE BUDGET NEUTRALITY AND COST IMPACTS

The file contains data obtained from Freestanding and Hospital-based Medicare HHA cost reports for full cost reporting periods beginning on or after May 31, 1991, and settlement dates before October 10, 1995. The data for each provider are MSA code, type of agency (freestanding or hospital-based), labor and non-labor cost for each of the six types of visits, and the number of visits by type. The costs are those taken directly from the cost reports before being inflated to reflect costs as of July 1, 1998. The market-basket inflation factor used to inflate costs from the end of the cost reporting period to July 1, 1997, is contained in the file as is the wage index factor.

Media:	Diskette and Internet
File Cost:	\$285.00

COST REPORTS

RENAL DIALYSIS FACILITIES

The Renal Dialysis Facilities Cost Report Extract contains cost and statistical data for free-standing and hospital-based renal dialysis providers. The data are in two separate files on each diskette. The data set includes only the most precise version of each cost report filed with HCFA. **The data set is normally updated quarterly and is available on the last day of the month following quarter end.**

Media:	Diskette (ASCII or PKZIP compressed) and Internet
File Cost:	\$285.00 per year
Available:	CY 94 through 98

HOME HEALTH AGENCY (HHA) COST REPORT SYSTEM MASTER FILE
--

The Home Health Agency Cost Report Master File contains one copy of each version (as submitted, settled, reopened) of each HCFA-1728-94 cost report filed by the provider with HCFA. The data comprise every line item originally included in the cost report extract created for HCFA by the Medicare Fiscal Intermediary. The earliest cost reports on the file are those with beginning dates of January 1, 1994. **The file is updated on a flow basis as cost report extracts are received at HCFA for successive fiscal periods until the HCFA-1728-94 form is obsolete.**

Media:	Cartridge
File Cost:	\$1,300.00

HHA PRACTICAL DATA SET

The HHA Practical Data Set contains statistical and utilization data, total cost and Medicare cost by cost center, settlement date and financial data for Medicare-certified free standing, hospital-based, and skilled

PUBLIC USE FILES FILE DESCRIPTIONS AND PRICES

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nursing facility (SNF)-based HHAs. The data sets include only the most current report (as submitted, final settled or reopened) submitted for a certified facility by the Medicare Fiscal Intermediary to HCFA. **These data sets are updated at the end of each calendar quarter and are available on the last day of the following month.**

Media:	Cartridge	
File Cost:	\$770.00 per year	
	Period beginning on or after	and before
HHA 94	1/1/94	10/1/94
HHA 95	10/1/94	10/1/95
HHA 96	10/1/95	10/1/96
HHA 97	10/1/96	10/1/97

Note: HHA 94 data set will include cost reports only for fiscal years ending on or after December 31, 1995

HOSPITAL COST REPORT SYSTEM MASTER FILE
--

The Hospital Cost Report System Master File contains one copy of each version (as submitted, settled, reopened) of each HCFA-2552 cost report filed with HCFA. The data consists of every data element included in the Hospital Cost Report Information System (HCRIS) extract created for HCFA by that provider's fiscal intermediary. **These files are updated as cost reports are received at HCFA.**

Media:	Cartridge	
File Cost:	\$1,070.00	
	Period beginning on or after	and before
HCFA-2552-92	10/01/91	09/29/96
HCFA-2552-96	09/30/96	to be established

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PPS IX-XII CAPITAL DATA SETS

The Capital Data Set contains selected data for capital-related costs, interest expense and related information, and complete balance sheet data from the Medicare Hospital Cost Report. The data set includes only the most current cost report (as submitted, final settled, or reopened) submitted for a Medicare Certified Hospital by the Medicare Fiscal Intermediary to HCFA. **This data set is updated at the end of each calendar quarter and is available on the last day of the following month.**

Media:	Cartridge		
File Cost:	\$770.00 per year		
		Periods beginning on or after	and before
PPS IX		10/01/91	10/01/92
PPS X		10/01/92	10/01/93
PPS XI		10/01/93	10/01/94
PPS XII		10/01/94	10/01/95

Note: File is part of PPS Hospital Data Set on page 23, as of FY 96.

PPS EXEMPT UNITS

The Exempt Hospitals and Excluded Units file contains cost, statistical and ancillary charge data for hospitals and subproviders of hospitals that are exempt from the Prospective Payment System (PPS). The data set includes only the most precise version of the cost report filed with HCFA. **The data set is normally updated quarterly and is available on the last day of the month following quarter end.**

Media:	Diskette (ASCII and PKZIP compressed)		
File Cost:	\$285.00 per year		
		Periods beginning on or after	and before
PPS-IX		10/01/91	10/01/92
PPS-X		10/01/92	10/01/93
PPS-XI		10/01/93	10/01/94
PPS-XII		10/01/94	10/01/95

Note: File is part of PPS Hospital Data Set on page 23, as of FY 96.

PPS IV-XII MINIMUM DATA SETS

The Minimum Data Set contains cost, statistical, financial, and other data from the Medicare Hospital Cost Report. The dataset includes only the most current cost report (as submitted, final settled, or reopened) submitted for a Medicare Certified Hospital by the Medicare Fiscal Intermediary to HCFA. **This dataset is updated at the end of each calendar quarter and is available on the last day of the following month.**

Media:	Cartridge		
File Cost:	\$770.00 per year		
		Periods beginning on or after	and before
PPS IV		10/01/86	10/01/87
PPS V		10/01/87	10/01/88
PPS VI		10/01/88	10/01/89
PPS VII		10/01/89	10/01/90
PPS VIII		10/01/90	10/01/91
PPS IX		10/01/91	10/01/92
PPS X		10/01/92	10/01/93
PPS XI		10/01/93	10/01/94
PPS XII		10/01/94	10/01/95

Note: File is part of PPS Hospital Data Set on page 23, as of FY 96.

PUBLIC USE FILES FILE DESCRIPTIONS AND PRICES

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PPS IX-XII MEDICARE PART B DATA SET

This file contains Part B Medicare cost and charges by cost center from the Medicare Hospital Cost Report. The data set includes only the most current cost report (as submitted, final settled, or reopened) submitted for a Medicare certified hospital by the Medicare Fiscal Intermediary to HCFA. **This dataset is updated at the end of each calendar quarter and is available on the last day of the following month.**

Media:	Cartridge		
File Cost:	\$770.00 per year		
		Periods beginning on or after	and before
PPS IX		10/01/91	10/01/92
PPS X		10/01/92	10/01/93
PPS XI		10/01/93	10/01/94
PPS XII		10/01/94	10/01/95

Note: File is part of PPS Hospital Data Set on page 23, as of FY 96.

WORKSHEET A DATA SET

The Worksheet A Data Set file contains the extract of the trial balance portion of HCFA-2552-92 Hospital Cost Reports. The data set includes only the most precise version of the cost report filed with HCFA. **The data set is normally updated quarterly and is available on the last day of the month following quarter end.**

Media:	Cartridge		
File Cost:	\$770.00 per year		
		Periods beginning on or after	and before
PPS-IX		10/01/91	10/01/92
PPS-X		10/01/92	10/01/93
PPS-XI		10/01/93	10/01/94
PPS-XII		10/01/94	10/01/95

Note: File is part of PPS Hospital Data Set on page 23, as of FY 96.

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FILE DESCRIPTIONS AND PRICES**

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PPS HOSPITAL DATA SET

The PPS Hospital Data Set contains cost, statistical, financial, and other data from the Medicare Hospital Cost Report. The data set includes only the most current cost report (as submitted, final settled, or reopened) submitted for a Medicare Certified Hospital by the Medicare Fiscal Intermediary to HCFA. **The data set is updated at the end of each calendar quarter and is available on the last day of the following month.**

Media:	Cartridge
File Cost:	\$1,250.00
	Periods beginning on or after and before
PPS XIII FY96	10/01/95 10/01/96
PPS XIV FY97	10/01/96 10/01/97

Note: The following change has been implemented with the release of the Fiscal Year 10/01/95 to 10/01/96 Hospital Cost Report Data Files. Five files have been combined into one data file called the PPS XIII Hospital Data Set. The five files are:

1. PPS Minimum Data Set
2. Capital Data Set
3. PPS Exempt Data Set
4. Worksheet A Data Set
5. Medicare Part B Data Set

Historical data will remain available as separate files. Upon release of the new Hospital Data Set the above data sets will no longer exist as individual files for current and future years.

SKILLED NURSING FACILITY MINIMUM DATA SETS

The Skilled Nursing Facility (SNF) Minimum Data Set contains cost, statistical, financial and other data from the Medicare SNF Cost Report and Hospital-Based SNF Cost Report. The data set includes only the most current cost report (as submitted, final settled, or reopened) submitted for a Medicare Certified SNF by the Medicare Fiscal Intermediary to HCFA. **This data set is updated at the close of each calendar quarter and is available on the last day of the following month**

Media:	Cartridge
File Cost:	\$770.00 per year
	Periods beginning on or after and before
SNF YEAR 1	10/01/88 10/01/89
SNF YEAR 2	10/01/89 10/01/90
SNF YEAR 3	10/01/90 10/01/91
SNF YEAR 4	10/01/91 10/01/92
SNF YEAR 5	10/01/92 10/01/93
SNF YEAR 6	10/01/93 10/01/94
SNF YEAR 7	10/01/94 10/01/95
SNF YEAR 8	10/01/95 10/01/96
SNF YEAR 9	10/01/96 10/01/97

PUBLIC USE FILES FILE DESCRIPTIONS AND PRICES

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SKILLED NURSING FACILITY COST REPORT SYSTEM MASTER FILE

The Skilled Nursing Facility Cost Report System Master File contains one copy of each version (as submitted, settled, reopened) of HCFA-2540 cost report filed by the provider with HCFA. The data comprise every line item originally included in the cost report extract created for HCFA by the Medicare Fiscal Intermediary. **These files are updated on a flow basis as cost report extracts are received at HCFA.**

Media:	Cartridge		
File Cost:	\$1,300.00		
		Period beginning on or after	and before
HCFA-2540-92		03/31/93	06/29/96
HCFA-2540-96		06/30/96	to be established

ENROLLMENT

ANNUAL COUNTY ENROLLMENT FILE

This file is derived from the Enrollment Data Base (EDB) and contains aged enrollment data by age range, race, and sex by county, State, census region, and division codes, including county names. **The file is usually produced in April and reflects enrollment as of July 1, of the previous year.** Although this file has been edited to protect the privacy of our beneficiaries, it does not meet the current Privacy Act provision, therefore, we now require a DUA.

Media:	Cartridge
File Cost:	\$570.00 per year
Available:	1987 through 1998

A SIGNED DATA USE AGREEMENT (DUA) REQUIRED

ANNUAL ZIP CODE ENROLLMENT FILE

This file is derived from the Enrollment Data Base (EDB) and contains aged and disabled enrollment data by age range, race, and sex within ZIP code. **The file is usually produced in April and reflects enrollment as of July 1, of the previous year.** Although this file has been edited to protect the privacy of our beneficiaries, it does not meet the current Privacy Act provision, therefore, we now require a DUA.

Media:	Cartridge
File Cost:	\$570.00 per year
Available:	1987, 1988, 1992 through 1998

A SIGNED DATA USE AGREEMENT (DUA) REQUIRED

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PAYMENT RATES INSTITUTIONAL PROVIDERS

AOR/BOR TABLES

This diskette contains data used to develop the Diagnosis Related Group (DRG) relative weights. It contains mean, maximum, minimum, standard deviation, and co-efficient of variation statistics by DRG for length of stay and standardized charges. The BOR tables are "Before Outliers Removed" and the AOR is "After Outliers Removed". (Statistical outliers, not payment outliers.)

Media:	Diskette and Internet
File Cost:	\$165.00
Available:	FY 2000 PPS Update

1. The Notice of Proposed Rule Making (NPRM) is usually published in the Federal Register, by the end of May.
2. The Final Rule is usually published in the Federal Register, by the first week of September.

DRGs RELATIVE WEIGHTS (Formally: Table 5 - DRGs)

This file contains a listing of Diagnosis Related Group (DRG) narrative description, relative weight, geometric mean, length of stay, and day outlier trim points. This table is published in the Federal Register as part of the Prospective Payment System Notice of Proposed Rule Making and the Final Notice.

Media:	Diskette and Internet
File Cost:	\$165.00
Available:	FY 2000 PPS Update

1. The Notice of Proposed Rule Making (NPRM) is usually published in the Federal Register, by the end of May.
2. The Final Rule is usually published in the Federal Register, by the first week of September.

PUBLIC USE FILES **FILE DESCRIPTIONS AND PRICES**

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HCEA MEDICARE CASE-MIX INDEX FILE

This file contains the Medicare case-mix index by provider number as published in each year's update of the Medicare Hospital Prospective Payment System (PPS). The case-mix index is a measure of the costliness of cases treated by a hospital relative to the cost of the national average of all Medicare hospital cases, using Diagnosis Related Group (DRG) weights as a measure of relative costliness of cases.

PPS FY	GROUP	#	MEDPAR		PUBLISH DATES		
RULES	VERSION	DRGS	DATA	YEAR	NPRM	FINAL	
			NPRM UPDATE	FY	FINAL UPDATE		
FY89	6.0	477	12/87	87	6/88	5/88	9/88
FY90	7.0	477	12/88	88	6/89	5/89	9/89
FY91	8.0	490	12/89	89	6/90	5/90	9/90
FY92	9.0	492	12/90	90	6/91	5/91	9/91
FY93	10.0	494	12/91	91	6/92	5/92	9/92
FY94	11.0	495	12/92	92	6/93	5/93	9/93
FY95	12.0	495	12/93	93	6/94	5/94	9/94
FY96	13.0	495	12/94	94	6/95	5/95	9/95
FY97	14.0	495	12/95	95	6/96	5/96	9/96
FY98	15.0	503	12/96	96	6/97	5/97	9/97
FY99	16.0	511	12/97	97	6/98	5/98	9/98
FY2000	17.0	499	12/98	98	6/99	5/99	9/99

Media: Diskette and most recent year on Internet
 File Cost: \$165.00 per year/per file

1. The Notice of Proposed Rule Making (NPRM) is published in the Federal Register, usually by the end of May.
2. The Final Rule is published in the Federal Register, usually by the first week of September.

**PUBLIC USE FILES
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HCEA WAGE DATA

This file contains the hospital hours and salaries used to create the wage indices used in the Medicare Hospital Prospective Payment System (PPS).

Processing Year	Wage Data	PPS Fiscal Year
2000	97	2001
99	96	2000
98	95	99
97	94	98
96	93	97
95	92	96
94	91	95
93	90	94
92	89	93
91	88	92

Media:	Diskette and most recent year on Internet
File Cost:	\$165.00 per year/per file
Available:	FY 2000 PPS Update

Note: In years prior to processing year 1991, the wage data was referred to as wage survey data.

1. The Notice of Proposed Rule Making (NPRM) is published in the Federal Register, usually in mid-February.
2. The Final Rule is published in the Federal Register usually in mid-May.

HCEA HOSPITAL WAGE INDICES (Formally: Urban/Rural/Hospital/Wage Indices)

This file contains a history of all wage indices used since October 1, 1983.

Media:	Diskette and most recent year on Internet
File Cost:	\$165.00 per year
Available:	FY 2000 PPS Update

1. The Notice of Proposed Rule Making (NPRM) is published in the Federal Register usually in mid-February.
2. The Final Rule is published in the Federal Register usually in mid-May.

PPS PAYMENT IMPACT FILE

This file contains data used to estimate FY 1999 payments under Medicare's Prospective Payment System (PPS) for capital costs. The data are taken from various sources, including the Provider Specific File, the PPS-X and PPS-XI Minimum Data Sets, and prior impact files. The data set is abstracted from an internal file used for the impact analysis of the changes to PPS published in the Federal Register. **This file is available for release one month after the Final Rule is published in the Federal Register, usually during the first week of September.**

Media:	Diskette and Internet
File Cost:	\$165.00
Available:	FY 2000 PPS Update

PUBLIC USE FILES FILE DESCRIPTIONS AND PRICES

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PPS STANDARDIZING FILE

This file contains information that standardizes the charges used to calculate relative weights to determine payments under PPS. Variables include wage index, Cost of Living Adjustment (COLA) case mix index, disproportionate share, and the Metropolitan Statistical Area (MSA). A new file is created for both the Notice of Proposed Rule Making (NPRM) and the Final Rule. The records are in provider number sequence, however, it is possible to have missing values in some records.

Media:	Diskette and Internet
File Cost:	\$165.00
Available:	PPS Update 2000

1. The Notice of Proposed Rule Making (NPRM) is published in the Federal Register, by the end of May.
2. The Final Rule is published in the Federal Register, usually by the first week of September.

PROVIDER SPECIFIC FILE

This file is a component of the PRICER program used in the Fiscal Intermediary's (FI) system to compute individual hospital Diagnosis Related Group (DRG) payments. The file contains records for all Prospective Payment System (PPS) eligible hospitals, including hospitals in waiver states. Data elements used in the PPS recalibration processes and related PPS activities are also included.

Media:	Diskette and Internet
File Cost:	\$265.00
Available:	PPS Update 2000

1. The Notice of Proposed Rule Making (NPRM) is published in the Federal Register, by the end of May.
2. The Final Rule is published in the Federal Register, usually by the first week of September.

RECLASSIFIED HOSPITALS

This file contains a listing of hospitals that were reclassified for the purpose of assigning a new wage index.

Media:	Diskette and Internet
File Cost:	\$165.00
Available:	FY 2000 PPS Update

1. The Notice of Proposed Rule Making (NPRM) is published in the Federal Register, usually by the end of May.
2. The Final Rule is published in the Federal Register, usually by the first week of September.

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SNF PROSPECTIVE PAYMENT RATES

This file contains cost, statistical, and other data used in establishing the Skilled Nursing Facility (SNF) prospective payment rates published in the Federal Register on May 14, 1998 for cost reporting periods beginning on or after July 1, 1998. The cost and statistical data are obtained from the hospital-based SNFs and Freestanding SNFs (Forms 2552, 2540, and 2540S). This file also contains the standardization factors and case-mix correction factors.

Media:	Diskette and Internet
File Cost:	\$285.00
Available:	July 1, 1998

HOME HEALTH PROSPECTIVE PAYMENT SYSTEM

The files included under this section were used in the development of the Home Health Prospective Payment System (HH PPS) for which the Notice of Proposed Rule Making (NPRM) was published in the Federal Register on October 28, 1999. The audited cost report file contains audited cost reports for sample agencies with cost reporting periods ending in fiscal year 1997. The provider level utilization file, derived from National Claims History (NCH) data and combined with wage index value data, contains visit totals for the 6 disciplines (skilled nursing, physical therapy, occupational therapy, speech language therapy, medical social, and home health aide) as well as the total number of episodes (for both episodes with less than or equal to 4 visits and for episodes with greater than 4 visits) aggregated to the provider level. The 199-code HCPC file contains the 199 procedure codes identified as non-routine medical supply codes that could be unbundled and billed under Part B. And finally, the grouper pseudocode file contains the logic for the classification of patients into one of the Home Health Resource Groups (HHRGs) used in determining the episode payment. When utilized in a manner similar to that described in the NPRM, these files can help interested parties in their understanding and analysis of this proposed system.

Media:	Diskette and Internet
File Cost:	\$285.00
Available:	October 1999

PAYMENT RATES NON-INSTITUTIONAL PROVIDERS

MEDICARE AMBULATORY SURGICAL CENTER (ASC) PROCEDURES AND PAYMENT GROUPS (FORMERLY: ASC BASE ELIGIBILITY FILE)

This file contains the procedure codes which may be performed in an ASC under the Medicare program and the ASC payment group assigned to each of the procedure codes. The ASC payment group determines the amount that Medicare pays for facility services furnished in connection with a covered procedure. **This file is updated annually usually in April.**

Media:	Diskette and Internet
File Cost:	\$85.00
Available:	CY 1999

See Section VI: Copyright

ANNUAL PHYSICIAN FEE SCHEDULE PAYMENT AMOUNT NATIONAL

This file contains one record for each unique combination of carrier, locality, procedure, and certain modifiers. Additionally, the file contains the Relative Value Units (RVUs) associated with the service and the Geographic Practice Cost Indices (GPCIs) associated with each locality. **This file is available after**

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publication in the Federal Register, usually in late November. The current year file will be updated periodically to incorporate mid-year changes. Updated files will be available on April 1, July 1, and October 1. Files purchased after January 1, will contain pricing data for carrier-priced services for the prior year. The files for the years 1992-1995 contain transition and full fee amounts. Files for the year 1996 forward contain only the full fee amounts because the transition period has ended.

Media:	Cartridge and Internet
File Cost:	\$1,120.00 per year
Available:	CY 1992 through CY 1999

See Section VI: Copyright

ANNUAL PHYSICIAN FEE SCHEDULE PAYMENT AMOUNT FILE SELECTED CARRIER

This file contains locality-specific pricing amounts for services covered by the Medicare Physician Fee Schedule. The file contains one record for the unique combination of carrier, locality, procedure, and certain modifiers. Additionally, the file contains the Relative Value Units (RVUs) associated with the service and the Geographic Practice Cost Indices (GPCIs) associated with the locality. This file is a subset of the Annual Physician Fee Schedule Payment Amount File -- National. **This file is available after publication in the Federal Register, usually in late November. The current year file will be updated periodically to incorporate mid-year changes. Updated files will be available on April 1, July 1, and October 1.** Files purchased after January 1, will contain pricing data for carrier-priced services for the prior year. The files for the years 1992-1995 contain transition and full fee amounts. Files for the year 1996 forward contain only the full fee amounts because the transition period has ended.

Media:	Cartridge and Internet
File Cost:	\$430.00 per carrier per year
Available:	CY 1992 through CY 1999

See Section VI: Copyright

CLINICAL DIAGNOSTIC LAB FEE SCHEDULE NATIONAL/CARRIER
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This file contains the carrier-specific fee schedules and national limitation amounts for the clinical laboratory services that are covered under the Clinical Diagnostic Laboratory Fee Schedule. The 1995 file contains pricing amounts for all clinical laboratory codes. For 1995 and 1996, each carrier's data are contained in a separate file; a total of 55 separate files are on the diskette. For 1997 and forward, all carrier-specific fee schedules and national limitation amounts will be contained in one file. For each unique combination of procedure, carrier, and locality, these files contain the carrier 60% and 62 % fee schedules and the 60% and 62% national limitation amounts. The locality field on these files identifies States for multi-State-carriers. **This file is usually released in December for the following year.**

Media:	Diskette and Internet
File Cost:	\$380.00 per year for National/Carrier combined
Available:	a. CY 1995 through CY 1996 ASCII and LOTUS formats as separate files b. CY 1997 through CY 1999 File is in ASCII and EXCEL formats as separate files

Note: CY 1993 and CY 1994 files are available in ASCII and LOTUS formats as separate files.
File Costs: \$165.00 per year for National only
\$285.00 per year for Carrier only

See Section VI: Copyright

DURABLE MEDICAL EQUIPMENT, PROSTHETICS/ORTHOTICS, AND SUPPLIES (DMEPOS) FEE SCHEDULE

This file contains a fee schedule amount, floor, ceiling, jurisdiction, and category for each unique combination of procedure code, modifier code (where applicable), and State of provider and beneficiary. The file is sorted in ascending DMEPOS category/procedure code/modifier order. **The DMEPOS fee schedule will be updated on a quarterly basis, with the January 1, implementation date being the primary update. In addition to the January file, updated files will be available in early April, July, and**

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October. These files will be complete replacement files for the DMEPOS fee schedule, not only the quarterly changes.

Media:	Diskette and Internet
File Cost:	\$165.00
Available:	CY 1999

NATIONAL PHYSICIAN FEE SCHEDULE RELATIVE VALUE FILE
--

This file contains information on procedure codes covered under the Medicare Physician Fee Schedule. For more than 10,000 physician services, the file contains the associated Relative Value Units (RVUs), a fee schedule coverage indicator, and various payment policy indicators needed for payment adjustments (i.e., payment of assistant at surgery, team surgery, billable medical supplies, etc.). The file contains one record for each unique combination of procedure code and modifier. **This file is available after publication in the Federal Register, usually in late November. Current year file will be updated periodically to incorporate mid-year changes. Updated files will be available on April 1, July 1, and October 1.** This file will contain a separate file of the Geographic Practice Cost Indices (GPCIs) for 1997 and forward.

Media:	Diskette and Internet
File Cost:	\$385.00 per year
Available:	CY 1992 through CY 1999

See Section VI: Copyright

PROVIDERS

ESRD RENAL PROVIDER FILE

The End Stage Renal Disease (ESRD) Renal Provider File contains Medicare approved providers who furnish kidney dialysis and/or kidney transplant services. It includes the location of the providers and the range of renal services available at those providers. **This file is updated twice a year, January and July four weeks after publication in the Federal Register.**

Media:	Diskette and Internet
File Cost:	\$165.00

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Available: January 1999 Update

MEDICARE PART B DURABLE MEDICAL EQUIPMENT SUPPLIERS
--

This file contains the names, physical addresses, mailing addresses, telephone numbers, owners, types of business, and other information regarding active suppliers of durable medical equipment, prosthetics, orthotics, and supplies that have been issued Medicare supplier numbers by the National Supplier Clearinghouse. This information was recorded by suppliers on HCFA Form 192. **This data set is updated quarterly and is available on the last day of the following month. The data contains six different types of records.**

1. Supplier Information
2. Supplier Specialty Information
3. Supplier Relation Data
4. Tax/Claims/Pay Information
5. License Information
6. Supplier Alias Information

Media:	Cartridge
File Cost:	\$850.00
Available:	1999

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PROVIDER OF SERVICES FILE

The Provider of Services (POS) Extract is created from the Online Survey and Certification Reporting System (OSCAR) data base. These data include provider number, name, and address and characterize the participating institutional providers. The data are collected through the HCFA Regional Offices. **The file contains an individual record for each Medicare-approved provider and is updated quarterly.**

Media: Cartridge
File Cost: \$850.00 per year
Available: CY 1991 through CY 1999
(Quarterly updates are available for the current year only.)

File Categories

1. Hospital
2. SNF/NF (dually)
3. SNF/NF (distinct)
4. Skilled Nursing Facilities (SNF)
5. Home Health Agencies (HHA)
6. Medicare Laboratories
7. Portable X-Rays
8. Physical Therapy/Speech Pathology
9. End Stage Renal Disease (ESRD)
10. Nursing Facilities (NF)
11. Intermediate Care Facility - Mentally Retarded (ICF/MR)
12. Rural Health Clinic
13. Physical Therapy - Independent Practice
14. Comprehensive Outpatient Rehab Facilities (CORF)
15. Ambulatory Surgical Centers (ASC)
16. Hospices
17. Organ Procurement Organization
18. CLIA67 Laboratories
19. Community Mental Health Centers (CMHC)
20. Screening Mammography
21. Federally Qualified Health Centers
22. CLIA88 Laboratories ÷ added: effective 1997

PROVIDER OF SERVICES - HOSPITAL LISTING

The listing contains the hospital Medicare provider number, facility name, address, city, State, and ZIP code.

Media: Diskette and Internet
File Cost: \$285.00
Available: **a. Quarterly Updates**
b. Yearly CY1996 through CY1999

**PUBLIC USE FILES
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UTILITIES/MISCELLANEOUS

BERENSON-EGGERS TYPE OF SERVICE (BETOS) FILE

This file contains procedure codes and the BETOS code assigned. Each procedure code file includes the descriptions of the BETOS codes.

Media:	Diskette and Internet
File Cost:	\$165.00
Available:	CY 1999

See Section VI: Copyright

CARRIER/LOCALITY STATE & COUNTY FILE

This file contains a record for each unique combination of carrier, locality, State, and county. It contains carrier number, carrier locality code name, Federal Information Processing Standards (FIPS) State and county codes, Social Security Administration (SSA) State and county codes, and Metropolitan Statistical Area/Business Enterprise Area (MSA/BEA) assignment. **This file is produced annually usually in September.**

Media:	Diskette and Internet
File Cost:	\$165.00
Available:	CY 1998

ICD-9-CM CONVERSION SOFTWARE FILES

The purpose of the Electronic ICD-9-CM Diagnosis and Procedure Conversion Table Reporting System for FY 1986 to FY 1998 is to provide a systematic approach to tracking modifications to codes and/or descriptions made to ICD-9-CM each year. The system was approved by HCFA and the National Center for Health Statistics (NCHS). The system contains tables sorted and presented in different orders for easy comment on code changes. This Electronic Reporting System (ERS) is the official version of the code changes. The system is updated after the publication of the final rule on code changes in the Federal Register usually the first week of September.

Media:	Diskette
File Cost:	\$285.00 per year
Available:	FY 1986 through FY 1998

Note: No further updates available for this file.

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ICD-9-CM VERSION 17.0 FILE

This diskette includes the following files and a corresponding abbreviated narrative description of each file.

- a. Major Diagnostic Category (MDC)
- b. Diagnosis Related Group (DRG)
- c. ICD-9-CM Diagnostic Code
- d. ICD-9-CM Procedure Code

These files are updated after the publication of the Final Rule in the Federal Register, usually by the first week of September.

Media:	Diskette and Internet
File Cost:	\$165.00
Available:	FY 1999 PPS Update

Note: Version 17.0 available September 1999.

PPS SSA/FIPS MSA STATE AND COUNTY CROSSWALK FILE

This file contains a crosswalk of state and county codes used by the Social Security Administration (SSA) and the Federal Information Processing Standards (FIPS), county name, and a historical list of Metropolitan Statistical Areas (MSA).

Media:	Diskette and Internet
File Cost:	\$165.00 per year
Available:	FY 1999 PPS Update

- 1. The Notice of Proposed Rule Making (NPRM) is published in the Federal Register, by the end of May.**
- 2. The Final Rule is published in the Federal Register, usually by the first week of September.**

UTILIZATION

**PUBLIC USE FILES
FILE DESCRIPTIONS AND PRICES**

October 1, 1999

ESRD RENAL FACILITY SURVEY FILE
--

The End Stage Renal Disease (ESRD) Renal Facility Survey data are collected annually by HCFA from all facilities certified to provide Medicare-covered renal dialysis and transplantation. The survey, which includes the entire United States, uses Form HCFA 2744 and encompasses the full calendar year. Geographical data are included to the level of ZIP code for the facility. Each record contains facility information and information on the number of patients served, the number of dialysis treatments provided, and the number of kidney transplants performed. The data includes services to both Medicare and non-Medicare patients. **This file is produced annually and is usually available in July.**

Media:	Diskette and most recent year on Internet
File Cost:	\$265.00 per year
Available:	CY 1987 through CY 1998

HOSPITAL SERVICE AREA FILE

This file is derived from the calendar year inpatient claims data. The records contain number of discharges, length of stay, and total charges summarized by provider number and ZIP code of the Medicare beneficiary. **This file is produced annually and is usually available in May.**

Media:	Cartridge
File Cost:	\$770.00 per year
Available:	CY 1986 through CY 1998

PHYSICIAN/SUPPLIER PROCEDURE SUMMARY MASTER FILE	(FORMERLY: PART B PROCEDURE FILE)
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This file is a 100% summary of all Part B Carrier and DMERC Claims processed through the Common Working File and stored in the National Claims History Repository. The file is arrayed by carrier, pricing locality, HCPCs, modifier 1, modifier 2, specialty, type of service and place of service. The summarized fields are total submitted services and charges, total allowed services and charges, total denied services and charges, and total payment amounts. **This file is produced annually and is usually available in July.**

Media:	Cartridge
File Cost:	\$1,820.00 per year
Available:	CY 1989 through CY 1998

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MEDICAID

MEDICAID STATISTICAL FILE

The file contains the complete Form HCFA-2082, *Statistical Report on Medical Care; Eligibles, Recipients, Payments and Services*, a report of Medicaid cost and utilization data that is submitted annually by States, territories, and the District of Columbia. The report summarizes data on Medicaid- eligible recipients, service utilization, and medical vendor payments on a federal fiscal year basis. All data are reported on the basis of individuals who receive medical care, rather than cases or families.

Available:

Comments:

- | | |
|----------------------|--|
| 1. Fiscal Year 1989: | Data for sections C through N are excluded for Rhode Island, Puerto Rico, Wyoming and Massachusetts' Blind Population. |
| 2. Fiscal Year 1990: | Data for sections C through N are excluded for Puerto Rico, and Massachusetts' Blind Population. |
| 3. FY 1991 and 1992: | This is the first year for inclusion of Arizona's Medicaid data into the 1991 Medicaid database. Data for sections C through N are excluded for Rhode Island, Puerto Rico, and Massachusetts' Blind Population. |
| 4. FY 1993 and 1994: | Data for Sections C through N are excluded for Rhode Island and Puerto Rico. |
| 5. Fiscal Year 1995: | Sections I through N are excluded for Virgin Islands except for Sections L(1) and (2). Data for Sections C through N are excluded for Rhode Island and Puerto Rico. |
| 6. Fiscal Year 1996: | Sections I through N are excluded for Virgin Islands except for Sections L(1) and (2). Data for Sections C through N are excluded for Puerto Rico. Florida data were estimated from test data for the Medicaid Statistical Information System (MSIS). Hawaii data do not include eligibles or recipients associated with their QUEST capitation population. |
| 7. Fiscal Year 1997: | Virgin Islands did not submit data for Sections D(1) and D(4). Sections I through N are excluded except or Sections L(1) and (2). Puerto Rico and Hawaii submitted total recipients and expenditures only. The recipient total is also used as the eligible total for these two Jurisdictions. Oklahoma submitted totals throughout the HCFA-2082. Nebraska excluded data for Sections E, F(1), F(2), and Sections I through N. Maine submitted totals in Sections D(1), (2), and (3). |

Note: This file is produced annually; usually available in September.

Media:
File Cost:

Cartridge (Recording Mode: SAS)
\$535.00 per year

**PUBLIC USE FILES
FILE DESCRIPTIONS AND PRICES**

October 1, 1999

MEDICAID DRUG UTILIZATION BY STATE BY QUARTER
--

The Medicaid Drug Utilization file contains State by State information on drug utilization by the Medicaid program. All drugs are identified by National Drug Code (NDC). The drug utilization is reported by individual drug products and includes the number of units of the drug that were reimbursed by the Medicaid program. The file also contains information on the number of prescriptions filled for each drug. No pricing data are included. **The quarterly file consists of approximately 500,000 records and is continuously updated.**

Media:	Cartridge
File Cost:	\$535.00 per quarter
Available:	Calendar quarter beginning 1/91

**PUBLIC USE FILES
FILE DESCRIPTIONS AND PRICES**

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MEDICAID STATISTICAL FILE DISKETTE

This file is based on information reported to HCFA by 50 States, the District of Columbia, Puerto Rico, and the Virgin Islands. The information is reported on the Form HCFA 2082 *Statistical Report on Medical Care: Eligibles, Recipients, Payments, and Services*. These tables are provided as a public service. HCFA cannot guarantee the accuracy of the data that were obtained from State Medicaid agencies.

A. Sections A and B of the HCFA 2082 report are extracted for fiscal years 1987 through 1989.

B. Sections A, B, and part of E and H (age, sex and race) of the HCFA 2082 report are extracted for fiscal year 1990.

Media:	Diskette
File Cost:	\$165.00 per year
Available:	FY 1987 through FY 1990

C. Sections I, J and N of the HCFA 2082 are excluded for fiscal years 1991 and 1992.

D. Sections I, J, M, and N of the HCFA 2082 report are excluded for fiscal years 1993 and 1994.

E. Fiscal Year 1995:

Sections I through N are excluded for Virgin Islands except for Sections L(1) and (2).
Data for Sections C through N are excluded for Puerto Rico.

F. Fiscal Year 1996:

Sections I through N are excluded for Virgin Islands except for Sections L(1) and (2). Data for Sections C through N are excluded for Puerto Rico. Florida data were estimated from test data for the Medicaid Statistical Information System (MSIS). Hawaii data do not include eligibles or recipients associated with their QUEST capitation population.

G. Fiscal Year 1997:

Virgin Islands did not submit data for Sections D(1) and D(4). Sections I through N are excluded except or Sections L(1) and (2). Puerto Rico and Hawaii submitted total recipients and expenditures only. The recipient total is also used as the eligible total for these two Jurisdictions. Oklahoma submitted totals throughout the HCFA-2082. Nebraska excluded data for Sections E, F(1), F(2), and Sections I through N. Maine submitted totals in Sections D(1), (2), and (3).

Note: This file is produced annually; usually available in September.

Media:	Diskette and Internet
File Cost:	\$210.00 per year
Available:	FY 1991 through FY1997 1. ASCII print file of individual tables 2. EXCEL

Files are available on the Internet for 1990 through 1997: <<http://www/hcfa.gov/medicaid/mstats.htm>>

Questions: (410) 786-4625

SECTION IV

BENEFICIARY ENCRYPTED FILES

**GENERAL INSTRUCTIONS FOR ORDERING BENEFICIARY ENCRYPTED
FILES**

**And
AGREEMENT FOR RELEASE**

Beneficiary Encrypted Files
GENERAL INSTRUCTIONS AND ORDERING INFORMATION
October 1, 1999

Please ensure that what you order is the exact data file you need and in the correct format. Each data file is individually generated to the specifications stipulated in this catalog. To process each order, the Health Care Financing Administration (HCFA) incurs processing costs associated with staff time, computer time, magnetic media and shipping. If you order the incorrect data file or the incorrect format, your money is non-refundable. Please allow 4 to 6 weeks for processing.

1. Standard Output Specifications:

- a. Tape
 - 1. Recording Mode ----- EBCDIC
 - 2. Tape Labeling ----- IBM Standard
 - 3. Density ----- IBM 3480 Cartridge
- b. Diskette 3 1/2"
 - 1. ASCII
 - 2. High Density
- c. Standard Analytical Files (See Section IV)
 - 1. Variable length
 - 2. Fixed length - multiple linked files - can be used by non-mainframe (PC-compatible for downloading)

2. Methods of Payment (All monies must be drawn on a U.S. bank):

- a. Payments must accompany order forms (No credit card payments). Make **company check** or **money order** payable to:
Health Care Financing Administration-PUF or HCFA-PUF
- b. Electronic Transmitted Payment For Other Federal Agencies Only
 - 1. U.S. Federal Government Agencies need Agency Location Code
 - 2. U.S. Banks only (contact HCFA's Accounting Office - 410-786-5428).
- c. Purchase Orders require prepayment.

3. Public Use File Inquiries:

- a. The Public Use Files Hotline:
(410) 786-3691
- b. The Public Use Files Fax number:
(410) 786-6418
- c. E-mail Address:
PUFS@HCFA.GOV
- d. The Beneficiary Encrypted Files Hotline:
(410) 786-3690

PRICES EFFECTIVE UNTIL OCTOBER 1, 2000
 U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



Beneficiary Encrypted Files
GENERAL INSTRUCTIONS AND ORDERING INFORMATION
October 1, 1999

- e. Decision Support Access Facility (DSAF) Helpline:
(410) 786-0159
- f. General Statistical Inquiries:
Medicaid: (410) 786-0165 or Medicaidstats@HCFA.GOV
Medicare: (410) 786-3689 or Medicarestats@HCFA.GOV

4. MAILING INSTRUCTIONS:

a. Regular Mailing Address*: (Regular U.S. Postal Service)

Health Care Financing Administration
 Public Use Files
 Accounting Division
 P. O. Box 7520
 Baltimore, Maryland 21207-0520

b. Federal Express, Airborne, etc.

Health Care Financing Administration
 OFM/Division of Accounting-Kara Cosby
 7500 Security Boulevard, C3-09-27
 Baltimore, Maryland 21244-1850

*Address must be written in its entirety.

Request must include name and telephone # of contact person.

(Allow 4-6 weeks for delivery depending on volume of PUF orders received)

5. Magnetic Media Return Policy:

HCFA will honor written requests for replacement files within **60 days** of the shipment date provided the cartridges or diskettes are returned with an explanation of the problem to the following address:

HCFA/Data Release Area
 Tape Library-PUF
 7500 Security Boulevard, NL-37
 Baltimore, Maryland 21244-1850

6. Data Quality Issues Form:

If while processing the file(s), an anomaly or data error is disclosed, please mail the Data Quality Issues form on page 15 with a detailed explanation of the problem to the address on the form.

7. Reproducing Public Use Files Documentation:

If you wish a reprint this package in whole or in part as an insertion to an article for distribution, you must notify:

Health Care Financing Administration
 Office of Information Services
 Enterprise Databases Group
 Public Use Files - Publication Release
 7500 Security Boulevard, N3-17-07
 Baltimore, Maryland 21244-1850

PRICES EFFECTIVE UNTIL OCTOBER 1, 2000
 U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



Please Print Legibly or Type

(This form is not to be used as a Beneficiary Encrypted Agreement Form)

BENEFICIARY ENCRYPTED FILES ORDER FORM ONLY

Health Care Financing Administration
Public Use Files
Accounting Division
P.O. Box 7520
Baltimore, Maryland 21207-0520
(410) 786-3691

Date: _____

PURCHASE REQUEST

	<u>FILE NAMES</u>	<u>YEAR</u>	<u>COST</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
		TOTAL	_____

COMPANY CHECK/MONEY ORDER AMOUNT: Payable to: HCFA-PUF _____

(No Personal Checks. All checks must be drawn on a U.S. bank.)

(No Credit Cards Accepted)

AGENCY LOCATION CODE (U.S. Federal Government) _____

OUTPUT SPECIFICATIONS: (See File Descriptions and Prices)

Cartridge (3480) _____

Standard Analytical Files - Select a or b a. Fixed _____ b. Variable _____

EXPRESS COMPANY: (i.e., Fed Exp, Airborne, etc.) _____

EXPRESS ACCOUNT: (Number) _____

NAME: _____

TITLE: _____

COMPANY/ORGANIZATION: _____

ADDRESS: _____

CITY/STATE/ZIPCODE: _____

PHONE NUMBER: _____ FAX NUMBER: _____

SIGNATURE: _____

Allow 4-6 weeks for delivery.

This form can be reproduced for additional orders.

PUF-3 Rev (10/99) U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



**INSTRUCTIONS FOR COMPLETING THE AGREEMENT
FOR RELEASE OF HEALTH CARE FINANCING ADMINISTRATION (HCFA)
BENEFICIARY ENCRYPTED FILES**

This agreement must be completed prior to the release of specific data files as described in the Public Use Files Catalog. The files requiring the completion of this agreement have a statement to that effect as part of the file description.

This agreement, if required for specified data files, should be completed and submitted with your Public Use Files Order Form and payment. Directions for the completion of the agreement follow:

- C Enter the specific names of the files being requested in the column headed "Filename(s)." The corresponding year(s) for those files should be entered on the appropriate line in the column headed "Year(s)."
- C The individual requesting the data should enter his/her name in the space provided for "Requestor Name." The company or organization name, address, and phone number (including area code) should be entered on the appropriate lines.
- C The requestor should enter the purpose for which the data will be used on the lines provided.
- C In Section B, enter the date of completion of the project. This is the date by which the data will be either returned to HCFA or destroyed.
- C The first line on the signature page should contain the typed or printed name and title of the requestor.
- C The second line should contain the signature of the requestor and the date the agreement was signed. This signature indicates that the requestor has read and agrees to the conditions outlined in the agreement.
- C The third line should contain the typed or printed name of the custodian of the files, if this is a different individual from the requestor. The custodian of the files is defined as that person who has actual possession of, and responsibility for, the data files. If the custodian of the files is the requestor, lines 3 and 4 should be left blank.
- C The fourth line should contain the signature of the custodian if the custodian is different from the requestor and the date the agreement was signed.
- C Lines 5 and 6 will be completed by HCFA.
- C In order to ensure the timely delivery of your data request, HCFA expects the recipients of its data to agree to observe the following procedure when ordering the Beneficiary Encrypted Files. After an order has been received and an Agreement For Release Of Beneficiary Encrypted Files (BEF's) has been issued either by fax or mail, the requestor is expected to return the signed agreement within 30 days. If HCFA does not receive the signed BEF's within the specified timeframe, HCFA reserves the right to cancel processing of the data order.
- C Please ensure that what you order is the exact data file you need and in the correct format. Each data file is individually generated to the specification stipulated in this catalog. To process each order, the Health Care Financing Administration (HCFA) incurs processing costs associated with staff time, computer time, magnetic media and shipping. If you order the incorrect data file or the incorrect format, your money is non-refundable. Please allow 2 to 6 weeks for processing.

AGREEMENT FOR RELEASE OF HEALTH CARE FINANCING ADMINISTRATION (HCFA) BENEFICIARY ENCRYPTED FILES

In order to ensure the confidence of the American public regarding the confidentiality of information collected and maintained by the Federal government, HCFA expects the requestors and recipients of its data to agree to observe the following conditions and to comply with these requirements. These requirements apply to the use of the file(s) released or any data derived from such files(s).

This agreement pertains to the release of the following HCFA data:

Filename(s)

Year(s)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Requestor Name--First and Last)

(Company/Organization)

(Street Address)

(City, State and ZIP Code)

(Phone Number--Including Area Code)

ORD#(if applicable)

The user represents and warrants, and in furnishing the data file(s) specified HCFA relies upon such representation and warranty, that such data file(s) will be used for the following purpose(s).

The user represents and warrants further that the facts and statements made in any project plan submitted to HCFA for each purpose are complete and accurate.

- A. The requestor shall make no attempt to identify any specific individual whose record is included in the file(s). No attempt will be made to unencrypt any person-level data in the file(s).
- B. The parties mutually agree that the aforesaid file(s) (and/or any derivative file(s) may be retained by the user until _____, hereinafter known as the "retention date."
- C. The requestor shall not disclose, release, reveal, show, sell, rent, lease, loan, or otherwise grant access to the data covered by this Agreement.
- D. The requestor shall not disclose any aggregations of data from the file(s) covered by this agreement without express written

authorization from HCFA.

- E. Absent express written authorization from HCFA, the requestor shall make no attempt to link records included in the file(s) to any other beneficiary-specific source of information.
- F. The requestor shall neither publish nor release any information that is derived from the file(s) and that could reasonably be expected to permit deduction of a beneficiary's identity.
- G. Appropriate administrative, technical, procedural, and physical safeguards shall be established by the recipient to protect the confidentiality of the data and to prevent unauthorized access to it. The safeguards shall provide a level of security that is at least comparable to the level of security referred to in OMB Circular No. A-130, Appendix III -- Security of Federal Automated Information Systems which sets forth guidelines for security plans for automated information systems in Federal agencies.
- H. For each file, the requestor shall pay the standard fee, established by HCFA.
- I. In the event the requestor makes an unauthorized disclosure of these data, HCFA may impose any or all of the following measures: (1) request a formal response to an allegation of an unauthorized disclosure, (2) require the submission of a corrective action plan formulated to implement steps to be taken to alleviate the possibility of any future unauthorized disclosure; (3) require the return of the data; and/or (4) sanction against further release of HCFA data to the organization/requestor in question.
- J. The requestor acknowledges that criminal penalties under section 1106(a) of the Social Security Act 942 USC 1306(a), including possible imprisonment, may apply with respect to any disclosure of information in the file(s) that is inconsistent with the terms of the agreement. The Requestor further acknowledges that criminal penalties under the Privacy Act (5 USC 552a(I)(3)) may apply if it is determined that the Requestor, or any individual employed or affiliated therewith, knowingly and willfully obtained the file(s) under false pretenses.

1. (Requestor name and title--typed or printed)

2. (Signature)

(Date)

3. (Typed or printed name of custodian of files, if different)

4. (Signature)

(Date)

5. (Typed or printed name/agency/telephone number of Federal representative)

6. (Signature)

(Date)

(Rev-98)

SECTION V

DESCRIPTIONS AND PRICES

(BENEFICIARY ENCRYPTED FILES)

BENEFICIARY ENCRYPTED DATA FILES FILE DESCRIPTIONS AND PRICES

October 1, 1999

BENEFICIARY ENCRYPTED FILES “RESTRICTED PUF”

Due to the recent emphasis at HCFA on privacy, confidentiality and the enactment of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 (H.R. 3103), HCFA is changing its policy in regard to “Restricted Public Use Files” (PUFs). “Restricted PUFs” will now be referred to as “Beneficiary Encrypted Files”. “The entity will be required to sign an Agreement For Release Of Beneficiary Encrypted Files in which the entity agrees that it will not attempt to identify individuals. The agreement also serves to advise the data recipient that any disclosure of information derived from these data files must first be approved by HCFA.”

The files affected by this change are:

- Standard Analytical Files (SAFs)
 - Physician/Supplier Part B
 - Durable Medical Equipment
 - Outpatient
 - Inpatient
 - Home Health Agency
 - Hospice
 - Skilled Nursing Facility
- Expanded Modified MEDPAR-Hospital (National) File
- Expanded Modified MEDPAR-Hospital (State) File
- Expanded Modified MEDPAR-SNF File
- Physician Sample File
- Denominator File and
- Health Insurance Skeleton Eligibility Write-off (HISKEW) File

Please complete the order form entitled “Beneficiary Encrypted Files Order Form” when ordering the above files. An Agreement for use of Health Care Financing Administration (HCFA) Beneficiary Encrypted Files must be completed and submitted with your order.

For information regarding the policies for requesting Beneficiary Encrypted Files, please contact OIS/EDG/DDLD, Division of Data Liaison Distribution on (410) 786-3690 (Data Release Hotline).

For information about the file content and release of the data files, contact OIS/EDG/DID, Division of Distribution on (410) 786-3691.

BENEFICIARY ENCRYPTED DATA FILES FILE DESCRIPTIONS AND PRICES

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October 1, 1999

STANDARD ANALYTICAL FILES

These files are available by type of claim or collectively as a group. The 5% sample is created based on selecting records with 05, 20, 45, 70 or 95 in positions 8 and 9 of the Health Insurance Claim (HIC) number. The term "providers" is used universally to refer to physicians, as well as, institutions. Medicare Institutional provider numbers are not encrypted; however, physician identifiers, e.g. UPINs, etc. are encrypted in the public use files.

Physician Identification (ID) numbers and Beneficiary HIC numbers are encrypted in the 5% files to protect the privacy of individuals. The "Beneficiary State of Residence Files" contain all services provided to a beneficiary based on their State of residence regardless of whether the service was performed in that State. Please note that in the 100% National file, the Physician ID numbers are encrypted and the Beneficiary Claim numbers are blanked out.

These files contain final action claims data in which all adjustments have been resolved. **The current year's data are available beginning with data submitted from January to June of that year. Thereafter, updates are created quarterly until the file is finalized at 18 months (in July of the following year)** (This 18-month window captures 98% of the claims.)

Residence 100% Files		Beneficiary State of Residence 5% Files		100% Files
--Phys/Supplier Part B***	\$5,820.00	n/a*	n/a* *	
--Outpatient***	\$3,270.00	\$21,380.00	\$7,070.00	
--Inpatient	\$2,540.00	\$12,300.00	\$4,070.00	
--Home Hlth Agency	\$2,030.00	\$6,160.00	\$2,040.00	
--Hospice	\$2,030.00	\$6,160.00	\$2,040.00	
--SNF	<u>\$1,130.00</u>	<u>\$2,810.00</u>	<u>\$1,020.00</u>	
Totals	\$16,820.00	\$48,810.00	\$16,240.00	

These prices are for each yearly file. The Physician/Supplier Part B files are available for the years 1991 through 1998. Physician/Supplier 5% sample data for calendar years 1988 through 1990 are available on the BMAD Beneficiary File. All other files are available for the years 1989 through 1997.

Media: Tape/Cartridge

File cost is per year

Recording Format: 1. Variable Length

2. Multiple Linked files (fixed length, unpacked records to be used by non-mainframe)

* n/a-100% Physician/Supplier Part B File not provided due to file size

**5% Physician/Supplier Part B File is available for each State at a cost of \$5,790.00.

***See Section VI: Copyright

Beneficiary Encrypted Files Hotline: (410) 786-3690

Note: See pages 57 and 58 for element encryption rules

A SIGNED AGREEMENT FOR RELEASE OF BENEFICIARY ENCRYPTED FILES (BEFs) REQUIRED

**BENEFICIARY ENCRYPTED DATA FILES
FILE DESCRIPTIONS AND PRICES**October 1, 1999

EXPANDED MODIFIED MEDPAR-HOSPITAL (NATIONAL)

The Medicare Provider Analysis and Review (MEDPAR) file contains records for 100% of Medicare beneficiaries who use hospital inpatient services.* The records are stripped of most data elements that will permit identification of beneficiaries. The hospital is identified by the six position Medicare billing number. The file is available to persons qualifying under the terms of the Routine Use Act as outlined in the December 24, 1984, Federal Register and amended by the July 2, 1985, Notice. The national file consists of approximately 11 million records.

1. The Notice of Proposed Rule Making (NPRM) is published in the Federal Register, usually available by the end of May. This file is derived from the MEDPAR file with a cutoff of three months after the end of the fiscal year (December file).

2. The Final Rule is published in the Federal Register usually by the first week of September. This file is derived from the MEDPAR file with a cutoff of nine months after the end of the fiscal year (June file). the

Media:	Cartridge
File Cost:	\$3,655.00 per year
Available:	FY 1988 through FY 1998

*The file is a federal fiscal year which specifies discharges occurring October 1 through September 30.

A SIGNED AGREEMENT FOR RELEASE OF BENEFICIARY ENCRYPTED FILES (BEFs) REQUIRED

**BENEFICIARY ENCRYPTED DATA FILES
FILE DESCRIPTIONS AND PRICES**

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October 1, 1999

EXPANDED MODIFIED MEDPAR-HOSPITAL (STATE)

Expanded Modified MEDPAR-Hospital extracted by State of Beneficiary Residence

The Medicare Provider Analysis and Review (MEDPAR) file contains records for 100% of Medicare beneficiaries who use hospital inpatient services. The records are stripped of most data elements that will permit identification of beneficiaries. The hospital is identified by the six position Medicare billing number. The file is available to persons qualifying under the terms of the Routine Use Act as outlined in the December 24, 1984, Federal Register and amended by the July 2, 1985, Notice. This is a subset of the Expanded Modified MEDPAR-Hospital (National) as described on page 51.

1. **The Notice of Proposed Rule Making (NPRM) is published in the Federal Register usually by the end of May. This file is derived from the MEDPAR file with a cutoff of three months after the end of the fiscal year (December file).**
2. **The Final Rule is published in the Federal Register usually by the first week of September. This file is derived from the MEDPAR file with a cutoff of nine months after the end of the fiscal year (June file).**

Media:	Cartridge
File Cost:	\$1,080.00 per State per year
Available:	FY 1988 through FY 1998

A SIGNED AGREEMENT FOR RELEASE OF BENEFICIARY ENCRYPTED FILES (BEFs) REQUIRED

EXPANDED MODIFIED MEDPAR-SKILLED NURSING FACILITY

This file is stripped of most data elements that will permit identification of beneficiaries. The Skilled Nursing Facility (SNF) is identified by the six position Medicare billing number. The file contains records for 100% of Medicare beneficiaries who use SNF services. The file is available to persons qualifying under the terms of the Routine Use Act as outlined in the December 24, 1984 Federal Register and amended by the July 2, 1985, Notice.

The Final Rule is published in the Federal Register usually by the first week of September. This file is derived from the MEDPAR file with a cutoff of nine months after the end of the fiscal year (June file).

Media:	Cartridge
File Cost:	\$850.00 per year
Available:	FY 1992 through FY 1998

A SIGNED AGREEMENT FOR RELEASE OF BENEFICIARY ENCRYPTED FILES (BEFs) REQUIRED

PHYSICIAN SAMPLE FILE (FORMERLY: BMAD PROVIDER FILE)

This file contains detailed line item information from claims submitted by physician/suppliers. Provider numbers and beneficiary claim numbers have been encrypted to protect the privacy of individuals.

Media:	Cartridge
File Cost:	\$3,785.00 per year
Available:	CY 1991 through CY 1996

Note: No further updates available for this file.

A SIGNED AGREEMENT FOR RELEASE OF BENEFICIARY ENCRYPTED FILES (BEFs) REQUIRED

BENEFICIARY ENCRYPTED DATA FILES FILE DESCRIPTIONS AND PRICES

October 1, 1999

5% SAMPLE DURABLE MEDICAL EQUIPMENT (DME) STANDARD ANALYTICAL FILE (SAF)

Beginning October 1, 1993, HCFA changed the way it handled the reporting of DME claims. The establishment of Durable Medical Equipment Regional Carriers (DMERCs) regionalized the processing for most of these claims. The transition period for this new procedure occurred between October 1, 1993, and June 30, 1994. During the phase-in, DME suppliers submitted claims for payment using the old and new method. The 1994 DME file contains claims for the last quarter of 1993 and includes all 1994 DME claims submitted to DMERCs. The 1997 file contains approximately 34 million records. Some DME claims will continue to be submitted through local carriers.

Media:	Cartridge
File Cost:	\$2,890.00 per year
Available:	CY 1994 through CY 1998

Note: See pages 57 and 58 for element encryption rules

A SIGNED AGREEMENT FOR RELEASE OF BENEFICIARY ENCRYPTED FILES (BEFs) REQUIRED

DENOMINATOR FILE

The Denominator File combines Medicare beneficiary entitlement status information from administrative enrollment records with third-party payer information and GHP enrollment information. The Denominator File contains data on all Medicare beneficiaries enrolled and/or entitled in a given year. Like the HISKEW File, it is an abbreviated version of the Enrollment DataBase (EDB) (selected data elements). It does not, however, contain data on all beneficiaries ever entitled to Medicare. The file contains data only for beneficiaries who were entitled during the year of the data. **These data are available annually in May of the current year for the prior year.**

Media:	Cartridge
File Cost:	5% File \$1,930.00 per year
	100% File \$8,670.00 per year
Available:	CY 1984 through CY 1998

Note: See pages 57 and 58 for element encryption rules

A SIGNED AGREEMENT FOR RELEASE OF BENEFICIARY ENCRYPTED FILES (BEFs) REQUIRED

HEALTH INSURANCE SKELETON ELIGIBILITY WRITE-OFF (HISKEW) FILE

The HISKEW File is a subset ("skeleton") of the data elements of the EDB, but, like the EDB, it contains data for every beneficiary ever entitled to Medicare. **These data are available annually in May of the current year for the prior year.**

Media:	Cartridge
File Cost:	5% File \$4,930.00 per year
	100% File \$18,460.00 per year
Available:	CY 1984 through CY 1998

Note: See pages 57 and 58 for element encryption rules

A SIGNED AGREEMENT FOR RELEASE OF BENEFICIARY ENCRYPTED FILES (BEFs) REQUIRED

BENEFICIARY ENCRYPTED DATA FILES

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October 1, 1999

BENEFICIARY ENCRYPTED DATA FILE ELEMENTS

DATA ELEMENT	HHA	HSP	I/P	SNF	O/P	P/S	DME
	5% - 100%	5% - 100%	5% - 100%	5% - 100%	5% - 100%	5%	5% - 100%
1. HIC	E ---- B	E ---- B	E ---- B	E ---- B	E ---- B	E	E ---- N/A
2. CATEGORY EQUATABLE BIC	E ---- B	E ---- B	E ---- B	E ---- B	E ---- B	E	E ---- N/A
3. BIC	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B	B	B ---- N/A
4. ZIP CODE:							
- PHYSICIAN						B	
- BENEFICIARY	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B	B	B ---- N/A
5. DATES:							
- FROM	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B	B	B ---- N/A
- THRU	YQ --- YQ	YQ --- YQ	YQ --- YQ	YQ --- YQ	YQ --- YQ	YQ	YQ --- N/A
- ADMISSION		YQ --- YQ	YQ --- YQ	YQ --- YQ			
- DATE OF BIRTH	R --- R	R --- R	R --- R	R --- R	R --- R	R	R --- N/A
6. PATIENT CONTROL NUMBER	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B		
7. MEDICAID PROVIER ID NO.	E ---- E	E ---- E	E ---- E	E ---- E	E ---- E		
8. CLAIM MEDICAL RECORD NO.	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B		
9. BENEFICIARY NAME			B ---- B	B ---- B			
10. CLAIM APPRO. GRACE DAY CT			B ---- B	B ---- B			
11. CLAIM APP. SERVICE FROM DATE			B ---- B	B ---- B			
12. CLAIM APP. SERVICE THRU DATE			B ---- B	B ---- B			
13. CWFB PROVIDER TAX NO.						E	E ---- N/A
14. PROFILING NO. - PERFORMING						E	
15. PROFILING NO. - REFERRING						E	
16. CLAIM PRIMARY CARE PHY. ID #**	E ---- B	E ---- B	E ---- B	E ---- B	E ---- B		
17. CLAIM PRINCIPAL PROC. PHY. ID**			E ---- B	E ---- B	E ---- B		
18. CLAIM OTHER PHYSICIAN ID NO.**			E ---- B	E ---- B	E ---- B		
19. PERFORMING PROVIDER UPIN						E	
20. CLAIM REFERRING PHY. UPIN						E	
21. CLAIM ORDERING PHY. UPIN							E ---- N/A

E -- ENCRYPTED B -- BLANKED R -- RANGE YQ -- YEAR & QUARTER

DATA ELEMENT SELECTIONS ARE TREATED AS 5% SELECTIONS.

FIELDS THAT HAVE NO INDICATOR IN THEM ARE NOT AVAILABLE IN THAT FILE.

** POSITIONS 1-6 SHOULD BE ENCRYPTED USING THE UPIN ENCRYPTION. POSITIONS 7-10 SHOULD BE BLANKED.

BENEFICIARY ENCRYPTED DATA FILES

October 1, 1999

BENEFICIARY ENCRYPTED DATA FILE ELEMENTS

DATA ELEMENT	DENOM	HISKEW
	5% -100%	5% -100%
1. HIC	E ---- B	E ---- B
2. CATEGORY EQUATABLE BIC	E ---- B	
3. BIC	B ---- B	E ---- B
4. ZIP CODE:		
- BENEFICIARY	B ---- B	B ---- B
5. DATES:		
- DATE OF BIRTH	B ---- B	R ---- R
6. BENE. RESIDENCE CHANGE DATE		B ---- B
7. BENE. SOCIAL SECURITY NUMBER		B ---- B
8. X-REF BENE. CLAIM ACCOUNT NO.		B ---- B
9. X-REF BENE. IDENTIFICATION CODE		B ---- B
10. BENE. DEATH DATE	B* ---- B*	B* ---- B*
11. BENE. SSA BENEFIT PAYMENT CODE		B ---- B

E -- ENCRYPTED B -- BLANKED R -- RANGED

B* - THIS FIELD WILL BE BLANKED UNLESS THERE IS A "V" IN THE VALID DAY OF DEATH FIELD.

DATA ELEMENT SELECTIONS ARE TREATED AS 5% SELECTIONS.

SECTION VI

**COPYRIGHT STATEMENT AND
AGREEMENT**

Copyrighted Material

Some material contained in certain Public Use Files are copyrighted by the American Medical Association (AMA) or the American Dental Association (ADA). Under the terms of the agreements between the Health Care Financing Administration (HCFA) and the AMA and the ADA, the copyrighted material may only be used for purposes directly related to participating in HCFA programs. Permission for any other use must be obtained from the AMA and/or the ADA.

Specifically, the 5-character numeric procedure codes and 2-character numeric modifiers (and the descriptors for both), which are used to report physicians' services on Medicare claims, are copyrighted by the AMA. They comprise the AMA's Current Procedural Terminology, Fourth Edition (CPT-4). The CPT-4 is available from the American Medical Association, 515 North State Street, Chicago, Illinois 60610 (telephone 1 (800) 621-8335). The 5-character alpha-numeric procedure codes beginning with D (and their descriptors), which reflect dental services, are copyrighted by the ADA. They comprise the ADA's Current Dental Terminology--Second Edition (CDT-2). The CDT-2 is available from the American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611.

Because these codes are used on Medicare claims, some of the copyrighted codes and/or descriptors may appear in the following Public Use Files:

- HCFA Common Procedure Coding System (HCPCS) (Alpha-Numeric Portion)(NOT A PUF)
- Medicare Ambulatory Surgical Center (ASC) Procedures and Payment Groups
- Berenson-Eggers Type of Service (BETOS) File
- Clinical Diagnostic Laboratory Fee Schedule - National/Carrier Files
- Annual Physician Fee Schedule Payment Amount (National) File
- Annual Physician Fee Schedule Payment Amount (Carrier) File
- National/Physician Fee Schedule Relative Value Unit (RVU) File
- Physician/Supplier Procedure Summary Master File
- Physician/Supplier Part B Standard Analytical File
- Outpatient Standard Analytical File

CPT-4 and CDT-2 codes and descriptors are not public property and must always be used in compliance with copyright law. Permission for any other use must be obtained from the AMA and/or the ADA, as appropriate.

The following notice should accompany forms or other material used by the public to request HCFA Public Use Files:

Carefully read the following terms and conditions prior to ordering any Public Use Files containing CPT codes. Your signature at the bottom of this page acknowledges your acceptance of these terms and conditions. We cannot provide you these files if you do not agree with these terms and conditions and do not sign this license.

LICENSE FOR USE OF "Physicians' CURRENT PROCEDURAL TERMINOLOGY," FOURTH EDITION ("CPT")

CPT codes and descriptions only are copyright 1996 American Medical Association. All Rights Reserved (or such other date of publication of CPT).

You, your employees and agents are authorized to use CPT internally within your organization for the sole use by yourself, employees and agents. You agree to take all necessary steps to insure that your employees and agents abide by the terms of this agreement. You acknowledge that the AMA holds all copyright, trademark and other rights in CPT.

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Paul A. Markowski at the American Medical Association, CPT Intellectual Property Services, American Medical Association, 515 N. State Street Chicago, Illinois 60610 or at telephone number 312-327-2249 should you wish to make additional uses of CPT.

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Signature

Print Name

Date:

SECTION VII

OTHER AVAILABLE DATA SOURCES

AND REFERENCES

ATTACHMENTS A, B, and C

**This data source is not furnished by the HCFA Public Use Files Area.
Address your inquiries to the source as indicated.**

**The following information is furnished in response to frequent
questions about other available data and data sources.**

HCFA PUBLICATIONS INQUIRIES AND DOCUMENTATION REQUESTS**HCFA's Mailing Address:**

7500 Security Boulevard,
Baltimore, Maryland 21244-1850

HCFA Research Publications and Projects

Office of Strategic Planning (OSP)
Systems, Technical, and Analytic Resources Group (STARG), C3-24-07
Hotline: (410) 786-7707
Fax: (410) 786-6511

HCFA Medicare Beneficiary Publications

Office of Internal Customer Support (OICS)
Division of Printing Mail Services (DPMS), SSL-12-15
Office: 1-800-638-6833
Fax: (410) 786-4786

Medicare Current Beneficiary Survey

Office of Strategic Planning (OSP)
Information Method Group (IMG), C3-17-07
Office: (410) 786-4881
Fax: (410) 786-5515

Medicare and Medicaid Data Dissemination

Office of Information Services (OIS)
Enterprise Databases Group (EDG)
Division of Information Distribution (DID), N2-04-27
Medicare Data Hotline (410) 786-3689
Medicaid Data Hotline (410) 786-0165

Medicaid Statistics, Program and Financial Statistics

Center for Medicaid and State Operations (CMSO)
Data and Systems Group (DSG)
Division of Information Analysis and Technical Assistance (DIATA), S3-18-13
Office: (410) 786-0780
Fax: (410) 786-0390
Publication Coordinator: (410) 786-6117

Attachment B**HCFA REGIONAL OFFICES**

- I. **BOSTON REGIONAL OFFICE**
John F. Kennedy Federal Building
Room 2325
Boston, Massachusetts 02203-0003
(617) 565-1232
Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island,
Vermont
- II. **NEW YORK REGIONAL OFFICE**
26 Federal Plaza, Room 3811
New York, New York 10278-0063
(212) 264-8289
New Jersey, New York, Puerto Rico, Virgin Islands
- III. **PHILADELPHIA REGIONAL OFFICE**
Public Ledger Building
150 South Independence Mall West, Suite 216
(215) 861-4213
Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West
Virginia
- IV. **ATLANTA REGIONAL OFFICE**
Atlanta Federal Center
61 Forsyth Street, S.W., Suite 4T20
Atlanta, Georgia 30303-8909
(404) 562-7150
Alabama, North Carolina, South Carolina, Florida, Georgia, Kentucky,
Mississippi, Tennessee
- V. **CHICAGO REGIONAL OFFICE**
105 West Adams, 15th Floor
Chicago, Illinois 60603-6201
(312) 353-7180
Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin
- VI. **DALLAS REGIONAL OFFICE**
1301 Young Street, 8th Floor
Dallas, Texas 75202
(214) 767-6401
Arkansas, Louisiana, New Mexico, Oklahoma, Texas

HCFA REGIONAL OFFICES (continued)

- VII. **KANSAS CITY REGIONAL OFFICE**
Richard Bolling Federal Building
601 East 12th Street, Room 235
Kansas City, Missouri 64106-2808
(816) 426-2866
Iowa, Kansas, Missouri, Nebraska
- VIII. **DENVER REGIONAL OFFICE**
Colorado State Bank Building
1600 Broadway, Suite 700
Denver, Colorado 80202-4367
(303) 844-6149
Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming
- IX. **SAN FRANCISCO REGIONAL OFFICE**
75 Hawthorne Street, 4th and 5th Floors
San Francisco, California 94105-3901
(415) 744-3602
American Samoa, Arizona, California, Guam, Hawaii, Nevada
- X. **SEATTLE REGIONAL OFFICE**
2201 Sixth Avenue, MS/RX-40
Seattle, Washington 98121-2500
(206) 615-2354
Alaska, Idaho, Oregon, Washington

Attachment C**ADDITIONAL INFORMATION RESOURCES****CURRENT PROCEDURAL TERMINOLOGY (CPT)**

Published information on the CPT's can be obtained from:
American Medical Association (AMA),
Telephone Number: 1-800-621-8335
Fax Number: 312-464-5600

American Medical Association
Coding Information Services
515 North State Street
Chicago, IL 60610
1-800-634-6922

CURRENT ICD-9-CM

Published information on the ICD-9 can be obtained from:
MEDICODE
Telephone Number: 1-800-999-4618
Fax Number: 801-536-1011

MEDICODE
5225 Wiley Post Way
Suite 500
Salt Lake City, UT 84116

DIAGNOSIS RELATED GROUP (DRG)

Published information on the DRG can be obtained from:
3M Health Information Systems
1-800-447-3828
Fax Number: 203-949-6331

3M Health Information Systems
100 Barnes Street
Wallingford, CT 06492

Attachment C**FEDERAL REGISTER NOTICES ON THE CURRENT PHYSICIAN FEE
SCHEDULE****(RELATIVE VALUE UNIT - RVU)**

To order paper copies of the Federal Register containing the documents, send request to:

New Orders
Superintendent of Documents
U.S. Government Printing Office
PO Box 371954
Pittsburgh, PA 15250-7954
(202) 512-1800

Charge: \$8.00 per copy

Copies of the source files for this document can also be purchased on high density 3.5-inch personal computer diskettes. The file formats on the diskettes are Word Perfect 6.1 or EXCEL. To order the Relative Value Unit (RVU) diskette, enclose a check or money order payable to "Superintendent of Documents" at the address below or enclose a Visa, Master Card, or Discover number and expiration date. Credit card orders can also be placed by calling the order desk.

Superintendent of Documents
Attn: Electronic Products
P.O. Box 37082
Washington, D. C. 20013-7082
(202) 512-1530
(Toll Free) 1-888-293-6498

Charge: \$17.00 per diskette

Attachment C**HCFA COMMON PROCEDURE CODING SYSTEM (HCPCS)**

Address Request To: National Technical Information Service (NTIS)
5285 Port Royal Road
Springfield, Virginia 22161
Telephone Number: 1-800-553-NTIS
Fax Number: (703) 605-6900

Media: 6250 BPI tape or 3480 cartridge
Cost: \$305.00
Media: Diskette
Cost: \$175.00

Note: Only Current Year Available

Address Request To: Superintendent of Documents
Government Printing Office
P.O. Box 371954
Pittsburgh, Pennsylvania 15250-7954
Telephone Number: (202) 512-1800

Media: Publication
Cost: \$28.00

Note: Only Current Year Available

See Section VI: Copyright

HCFA's LAWS, REGULATIONS, MANUALS* on CD-ROM

Vendor/Supplier

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Superintendent of Documents
P.O. Box 371954
Pittsburgh, PA 15250-7954

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(202) 512-1800 Fax (202) 512-2250

Title: HCFA'S Laws, Regulations, Manuals on CD-Rom
List ID: HCLRM
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Price: \$228.00 per year (12 monthly updates)
\$ 27.00 per single disc

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DOS 3.1 or Higher
CD-ROM Reader
Memory Minimum 500K
2MB hard disk space

Problems/Complaints: (202) 512-1530

Attachment C**HCFA's LAWS, REGULATIONS, MANUALS* on CD-ROM (continued)****WHAT'S INCLUDED****HCFA PROGRAM MANUALS**

Carrier QA Handbook
 Christian Science Sanitorium
 Coverage Issues
 Federal Qualified HMOs
 HMO/CMP
 Home Health Agency
 Hospice
 Hospital
 Medicare Carriers
 Medicare Intermediary
 Outpatient Physical Therapy

Peer Review Organization
 Provider Reimbursement
 Regional Office
 Renal Dialysis Facility
 Rural Health Clinic and
 Federally Qualified Hlth
 Center
 Skilled Nursing Facility
 State Buy-in
 State Medicaid
 State Operations

CODE OF FEDERAL REGULATIONS

Title 42 (400 - 429)
 Medicare/Medicaid

Updated Version through Daily
 Federal Register Final
 Rules and Correction Notices
 Annual Reprints for October 1,
 1997 & 1998

(DAB)-

Title 42 Public Health
 Board
 (annual reprints)
 Title 45 (1-499) Public Welfare
 (annual reprints)

SOCIAL SECURITY ACT

Title 11 PROs
 Title 18 Medicare
 Title 19 Medicaid

OTHER

Program Memoranda

Departmental Appeals Board

Decisions
 Provider Reimbursement Review

Decisions-current on daily
 Federal Register
 Preambles current year

*HCFA is undertaking an effort to provide electronic versions of program manuals on our website. Given limited resources and manpower, we will make as many of the manuals available as soon as possible.

Please visit <<http://www.hcfa.gov/pubforms/program.htm>>

Attachment C**INTERNATIONAL CLASSIFICATION OF DISEASES, 9TH REVISION.
CLINICAL MODIFICATION, FOURTH EDITION. VOLUME 1, DISEASE
TABULAR LIST. VOLUME 2, DISEASES ALPHABETIC INDEX**

*Prepared by the Public Health Service,
Rockville, Md.*

The International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) is based on the official version of the World Health Organization's 9th Revision, International Classification of Diseases (ICD-9-CM). ICD-9 is designed for the classification of morbidity and mortality information for statistical purposes, and for the indexing of hospital records by disease and operation, for data storage and retrieval. Historical background may be found in the Introduction to ICD-9. Volume 2 is the Alphabetic Index to Volume 1, Diseases: Tabular List, of the International Classification of Diseases, 9th Revision, Clinical Modification. The Alphabetic Index is an important supplement to the Tabular List since it contains many diagnostic terms which do not appear in Volume 1. Order number PB92-173285NDT. \$288. Outside the U.S., Canada, and Mexico, the price is \$575.

National Technical Information Services Telephone: 1-800-553-NTIS (Fax) 703-605-6900

DATAFILES AND SOFTWARE FROM HCFA

Prepared by the Health Care Financing Administration

This product contains manuals, datafiles, and software from the Health Care Financing Administration. Available software includes Physician Claim Entry System, Medicare Code Editor, GROUPER, and PRICER. Some examples of datafiles are: Geographic Medicare Economic Index, HCFA Common Procedure Coding System, Hospital Data by Geographic Area for Aged Medicare Beneficiaries, and Refining the Malpractice Geographic Cost Index.

To receive descriptions of these and other products from HCFA, call 1-800-553-NTIS and ask for free catalog PR-821NDT.

Attachment C**NATIONAL LISTING OF MEDICARE PROVIDERS FURNISHING KIDNEY
DIALYSIS AND TRANSPLANT SERVICES**

National Listing of Medicare Providers Furnishing Kidney Dialysis and Transplant
Services is now available from: Pub #017-060-00608-1

(1998) Cost: \$15.00

Superintendent of Documents
U. S. Government Printing Office
Washington, D. C. 20402

Telephone Number: (202)512-1800

U.S. Government Printing Office (GPO)
http://www.access.gpo.gov/su_docs

HealthCare: 202-512-1800
Fax: 202-512-2250
Tape: 202-512-1530

Attachment C**UNIQUE PHYSICIAN IDENTIFICATION NUMBER (UPIN)**

Technical Contact
 Gerald Wright
 (410) 786-5798

This directory was published in 1991 with updated supplements published for 1992 through 1995. The current supplement covers all States. The stock number and prices are shown below.

Current UPIN Directory Supplement	\$21.00
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To obtain a hardcopy contact:	United States Government Printing Office Superintendent of Documents P.O. Box 371954 Pittsburgh, Pennsylvania 15250 (202) 512-1800
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